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## APPLICANTS

Florent Duqueroie, Paris, FRANCE;

## \*\* CONTINUING DATA \*\*\*\*\*

None rh

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

OK rh

FRANCE 00 04347 04/05/2000

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/10/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>RS</u> Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 53	<b>INDEPENDENT CLAIMS</b> 2
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## TITLE

Application member, application system, and method

<b>FILING FEE RECEIVED</b> 1434	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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